

	in this information to identify your optor 1 Penny Lynr									
	otor 2 puse, if filing)			_						
Uni	ted States Bankruptcy Court for the	e: EASTERN DISTRICT	OF PENNSYLVANIA							
	se number 17-16030	-		Check if this is: An amended filing						
					suppleme	ent showing postpetition chapte as of the following date:	er			
	fficial Form 106l			MM / DD/ YYYY						
S	chedule I: Your Inc	ome				12	2/15			
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ır spouse is not filing w	ith you, do not include inforn	nation abou	t your spo	ouse. If more space is needed				
1.	Fill in your employment information.		Debtor 1		Debtor 2 or non-filing spouse					
	If you have more than one job,	Employment status	■ Employed		☐ Employed					
	attach a separate page with information about additional	Employment status	☐ Not employed		☐ Not employed					
	employers.	Occupation	Vet Tech							
	Include part-time, seasonal, or self-employed work.	Employer's name	Wyomissing CVP Group	р						
	Occupation may include student or homemaker, if it applies.	Employer's address	Reading, PA 19610							
		How long employed t	here? 1 month		_					
Par	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the cuse unless you are separated.	ate you file this form. If	you have nothing to report for a	any line, write	e \$0 in the	space. Include your non-filing				
,	u or your non-filing spouse have me space, attach a separate sheet to		ombine the information for all e	mployers for	that perso	n on the lines below. If you nee	∌d			
				For De	btor 1	For Debtor 2 or non-filing spouse				
2.	List monthly gross wages, sala deductions). If not paid monthly,			\$2	2,106.00	\$ N/A _				
3.	Estimate and list monthly over	time pay.	3.	+\$	0.00	+\$ <u>N/A</u>				

Calculate gross Income. Add line 2 + line 3.

4. \$ 2,106.00

N/A

Debto	or 1	Penny Lynn Fusner			Case ı	number (<i>if kno</i>	wn)	17-16	030		
					For	Debtor 1			Debtor	2 or	
	Cop	by line 4 here	4.		\$	2,106.	00	\$	mig o	N/A	_
5.	l ist	all payroll deductions:									_
0.	5a.	Tax, Medicare, and Social Security deductions	58	2	\$	417.	26	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5l		\$_		00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	50		\$		00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50	d.	\$		00	\$		N/A	_
	5e.	Insurance	56	e.	\$	0.	00	\$		N/A	\
	5f.	Domestic support obligations	5f		\$		00	\$		N/A	_
	5g.	Union dues	50		\$_ \$		00	—		N/A	
_	5h.	Other deductions. Specify:		h.+	»—			+ \$		N/A	_
		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	417.		\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,688.	74	\$		N/A	<u>\</u>
	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.		a.	\$		00	\$		N/A	
	8b.	Interest and dividends	81	b.	\$	0.	00	\$		N/A	<u>\</u>
	8c.	Family support payments that you, a non-filing spouse, or a depende regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80 80	C.	\$	0.	00	\$		N/A	<u>\</u>
	8d.	. , .	80		\$		00	\$		N/A	
	8e.	Social Security	86	e.	\$	0.	00	\$		N/A	<u>\</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f	f.	\$	0.	00	\$		N/A	
	8g.	Pension or retirement income	8 <u>(</u>	g.	\$	0.	00	\$		N/A	<u> </u>
	8h.	Other monthly income. Specify: Contribution from boyfriend	8l	h.+	\$	432.	00	+ \$		N/A	_
		2016 refund pro rata			\$	20.	00	\$		N/A	<u>\</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [\$	452.	00	\$		N/	Α
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,140.74	s		N/A	= \$	2,140.74
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		* -		2,140.74	` * -			-	2,140.74
	Incl othe Do	te all other regular contributions to the expenses that you list in Schedulude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not perfy:	ur dep						chedule 11.		0.00
		the amount in the last column of line 10 to the amount in line 11. The rete that amount on the Summary of Schedules and Statistical Summary of Cerlies							12.	\$	2,140.74
13.	Do :	you expect an increase or decrease within the year after you file this for	m?							Combi	ined Ily income
		No. Yes Eynlain:									